PHA Plans

Streamlined Annual Version 2006v03

U.S. Department of Housing and Urban Development Office of Public and Indian

Office of Public and Indian

Housing

OMB No. 2577-0226

 $(\exp. 05/31/2006)$

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan for Fiscal Year: 2006

ior fiscal rear: 2000

PHA Name:

Talihina Housing Authority

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

form **HUD-50075-SA** (4/30/2003)

Streamlined Annual PHA Plan Agency Identification

PHA Name: Talihina Hou	sing Au	ithority PHA Num	ber: OK 088	
PHA Fiscal Year Beginnin	g: <mark>07/01</mark>	/2006		
PHA Programs Administer Public Housing and Section 8 Number of public housing units: Number of S8 units: PHA Consortia: (check box	Section 8 O Numb	er of S8 units: Numbe	r of public housing units	:
Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				
Public Access to Informati Information regarding any activities PHA's main administrative off	ON outlined in	(if available): ok088@talil this plan can be obtained PHA's development man	by contacting: (selec	t all that apply)
Display Locations For PH	A Plans	and Supporting Do	ocuments	
The PHA Plan revised policies or progrinspection. Yes No. If yes, select all that apply: Main administrative office of to PHA development management Main administrative office of to Public library	he PHA nt offices he local, co		e available for public of the other (list below)	review and
PHA Plan Supporting Documents are at Main business office of the PHO Other (list below)		inspection at: (select all that PHA development mana		
Str		ed Annual PHA Pla cal Year 2006	an	

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[24 CFR Part 903.12(c)]

A.

Table of Contents

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

\boxtimes	1. Site-Based Waiting List Policies
903.7(b	(2) Policies on Eligibility, Selection, and Admissions
\boxtimes	2. Capital Improvement Needs
903.7(g) Statement of Capital Improvements Needed
	3. Section 8(y) Homeownership
903.7(k	(1)(i) Statement of Homeownership Programs
	4. Project-Based Voucher Programs
\boxtimes	5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any
	policies, programs, or plan components from its last Annual Plan.
\boxtimes	6. Supporting Documents Available for Review
\boxtimes	7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual
	Statement/Performance and Evaluation Report
\boxtimes	8. Capital Fund Program 5-Year Action Plan
ATTAC	CHMENT A: Performance and Evaluation Report for Capital Funds

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*: <u>Board Resolution to Accompany the Streamlined Annual Plan</u> identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, *Certification for a Drug-Free Workplace*;

PHA PLAN COMPONENTS

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL &SF-LLLa, Disclosure of Lobbying Activities.

1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year

Page 3 of 30 form **HUD-50075-SA** (04/30/2003)

PHA Name: HA Code:

> 1. Has the PHA operated one or more site-based waiting lists in the previous year?NO If yes, complete the following table; if not skip to B.

		Site-Based Waiting Li	sts						
Development Information: (Name, number, location) Date Initiated Initial mix of Racial, Ethnic or Disability Demographics Demographics Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL Or Disability									
3. How many unit of or settlement agr based waiting lis B. Site-Based Wait If the PHA plans to oper questions; if not, skip to 1. How many site-base 2. Yes No: A 3. Yes No: A 4. Where can interester (select all that applement of the phase) PHA m All PHA Manage At the december of the phase of the	Is the PHA the surement? If yes, do to will not violate of the time Lists – Cominate one or more sinext component. The ded waiting lists we have any or all of the are not part of a lif yes, how many day families be on lif yes, how many do persons obtain ray)? The development material and administrative development material and administrative development material and and and approach to the component of the co	licant turn down before be abject of any pending fair escribe the order, agreement be inconsistent with the ng Year te-based waiting lists in the lill the PHA operate in the ePHA's site-based waiting previously-HUD-approve y lists? more than one list simult y lists? more information about ar office	ag lists new for the upcoming distering list play aneously and sign up to be on the site-	based waiting list? O or any court order the how use of a site-laint below: The of the following on the property of the following on the property of the prope					

<u>2. Capital Improvement Needs</u> [24 CFR Part 903.12 (c), 903.7 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. **Capital Fund Program**

form **HUD-50075-SA** (04/30/2003)

PHA Name: HA Code:	Streamlined Annual Plan for Fiscal Year 20
1. X Yes No	Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2. ☐ Yes ⊠ No:	Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).
	Public Housing Development and Replacement Activities (Non-Capital Fund)
Applicability: All PHAs a	administering public housing. Identify any approved HOPE VI and/or public housing ent activities not described in the Capital Fund Program Annual Statement.
1. ☐ Yes ⊠ No: Has	the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).
2. Status of HOPE	VI revitalization grant(s):
	HOPE VI Revitalization Grant Status
a. Development Number	
b. Development Number:c. Status of Grant:	
☐Revitalization☐Revitalization	Plan under development Plan submitted, pending approval
	Plan approved suant to an approved Revitalization Plan underway
3. ☐ Yes ⊠ No:	Does the PHA expect to apply for a HOPE VI Revitalization grant in the
3. ☐ 1es ☐ No.	Plan year?
	If yes, list development name(s) below:
4. ☐ Yes ⊠ No:	Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:
5. ☐ Yes ⊠ No: Will	the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:
	ant Based AssistanceSection 8(y) Homeownership Program art 903.12(c), 903.7(k)(1)(i)]
1. ☐ Yes ⊠ No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)

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PHA Name: HA Code:		Streamlined Annual Plan for Fiscal Year 20
2. Program	Description:	
a. Size of Pr		Will the PHA limit the number of families participating in the Section 8 homeownership option?
		If the answer to the question above was yes, what is the maximum number of participants this fiscal year?
b. PHA-esta	ıblished eligib No:	Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria:
c. What acti	ons will the P	PHA undertake to implement the program this year (list)?
3. Capacity	of the PHA to	o Administer a Section 8 Homeownership Program:
Esta required insu und Parte exp	ablishing a mi uiring that at l quiring that fir ared or guaran erwriting requenting with a erience below	ed its capacity to administer the program by (select all that apply): inimum homeowner downpayment requirement of at least 3 percent of purchase price and least 1 percent of the purchase price comes from the family's resources. In ancing for purchase of a home under its Section 8 homeownership will be provided, nated by the state or Federal government; comply with secondary mortgage market uirements; or comply with generally accepted private sector underwriting standards. In qualified agency or agencies to administer the program (list name(s) and years of a unit it has other relevant experience (list experience below):
		ject-Based Voucher Program ject-Based Assistance
		e PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the next component. If yes, answer the following questions.
		Are there circumstances indicating that the project basing of the units, rather than tenant- ne amount of assistance is an appropriate option? If yes, check which circumstances apply:
	access to	ization rate for vouchers due to lack of suitable rental units o neighborhoods outside of high poverty areas escribe below:)
	icate the numb lible census tr	ber of units and general location of units (e.g. eligible census tracts or smaller areas within acts):

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PHA Name: HA Code:

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the

- 1. Consolidated Plan jurisdiction: State of Oklahoma
- jurisdiction: (select all that apply)

 The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.

 The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

 The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

 Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

 Oher: (list below)
- 3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

6. Supporting Documents Available for Review for Streamlined Annual PHA Plans

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

	List of Supporting Documents Available for Review							
Applicable & On Display	Supporting Document	Related Plan Component						
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;	5 Year and Annual Plans						
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan	Streamlined Annual Plans						
X	Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.	5 Year and standard Annual Plans						
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans						
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs						

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	List of Supporting Documents Available for Review	
Applicable & On Display	Supporting Document	Related Plan Component
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
NA	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents. Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development. Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
NA	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self- Sufficiency
NA	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
NA	Any policies governing any Section 8 special housing types Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
NA	Section 8 informal review and hearing procedures. Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
NA	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
NA	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
NA	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
NA	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing	Annual Plan: Conversion of Public Housing

	List of Supporting Documents Available for Review							
Applicable & On Display	Supporting Document	Related Plan Component						
	Act of 1937, or Section 33 of the US Housing Act of 1937.							
X	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing						
NA	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership						
NA	Policies governing any Section 8 Homeownership program (Sectionof the Section 8 Administrative Plan)	Annual Plan: Homeownership						
X	Public Housing Community Service Policy/Programs ☐ Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency						
X	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency						
NA	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency						
NA	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency						
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency						
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy						
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit						
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)						
	Consortium agreement(s) and for Consortium Joint PHA Plans Only: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations						

	mance and Evaluation Report								
	d Capital Fund Program Replacement Housing Fa								
PHA Name: Talihina Housin		Frant Type and Number			Federal FY				
		Capital Fund Program Gr		06	of Grant:				
	nent Reserve for Disasters/ Emergencies Revis	Replacement Housing Fac			2006				
Line No.	Summary by Development Account	inal Performance and Evaluation Report Total Estimated Cost Total Actual Cost							
Line No.	Summary by Development Account			Total Actual Cost					
1	Total non-CFP Funds	Original	Revised	Obligated	Expended				
1		8000							
2	1406 Operations	8000							
3	1408 Management Improvements	1000							
4	1410 Administration	4000							
5	1411 Audit								
6	1415 Liquidated Damages								
7	1430 Fees and Costs								
8	1440 Site Acquisition								
9	1450 Site Improvement	31,073							
10	1460 Dwelling Structures								
11	1465.1 Dwelling Equipment—Nonexpendable								
12	1470 Nondwelling Structures								
13	1475 Nondwelling Equipment								
14	1485 Demolition								
15	1490 Replacement Reserve								
16	1492 Moving to Work Demonstration								
17	1495.1 Relocation Costs								
18	1499 Development Activities								
19	1501 Collaterization or Debt Service								
20	1502 Contingency								
21	Amount of Annual Grant: (sum of lines 2 – 20)	43073							
22	Amount of line 21 Related to LBP Activities								
23	Amount of line 21 Related to Section 504	10400							
	compliance								
24	Amount of line 21 Related to Security – Soft Costs								
25	Amount of Line 21 Related to Security – Hard								
	Costs								
26	Amount of line 21 Related to Energy Conservation								
	Measures								
	1	1							

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Talihina		Grant Type an Capital Fund P	d Number rogram Grant No:	OK56P088501-06	Federal FY of Grant: 2006			
		Replacement F	lousing Factor Gra	nt No:	O			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Operations	1406		8000				
"	Contract Administration and project documentation	1410		4000				
001	Off-street parking Site A	1450	5250 sq. ft.	10400				
001	Playground Site B	1450	20000 sq. ft.	20673				
	Total			43073				

Housing Factor									
Annual Statement	t/Performa	ance and I	Evaluatio	n Report					
Capital Fund Pro	gram and	Capital F	und Prog	gram Replac	ement Hous	ing Factor	(CFP/CFPRHF)		
Part III: Implementation Schedule									
PHA Name: Talihina			Type and Nu		21.06		Federal FY of Grant: 2006		
			al Fund Progra cement Housir	m No: <mark>OK56P08850</mark> ng Factor No:	01-06				
Development Number		Fund Obligate			ll Funds Expended		Reasons for Revised Target Dates		
Name/HA-Wide Activities	(Qua	arter Ending D	ate)	(Q	(Quarter Ending Date)				
	Original	Revised	Actual	Original	Revised	Actual			
	6-30-08			6-30-10					
						1			

	t/Performance and Evaluation Report gram and Capital Fund Program Replacement Housing Fac	etor (CFP/CFPRH	F) Part I. Summary	7		
PHA Name: Talihin	na Housing Authority G C R al Statement Reserve for Disasters/ Emergencies Revis	Grant Type and Number Capital Fund Program Grant No: OK56P08850102 Replacement Housing Factor Grant No:				
⊠ Performance an Line No.	nd Evaluation Report for Period Ending: 12-31-05 Fina Summary by Development Account		d Evaluation Report		Actual Cost	
Line No.	Summary by Development Account	Original	Revised	Obligated	Expended	
1	Total non-CFP Funds	Original	Reviseu	Obligated	Expended	
2	1406 Operations	38300	38300	38300	38300	
3	1408 Management Improvements	30300	30300	30300	30300	
4	1410 Administration	4100	4100	4100	4100	
5	1411 Audit		.100	.100	.100	
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	2443	1942.92	1942.92	642.92	
11	1465.1 Dwelling Equipment/Nonexp.	2589	3294.08	3294.08	1980	
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	4000	3795	3795	3795	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service					
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2 – 20)	51432	51432	51432	48817.92	
22	Amount of line 21 Related to LBP Activities					
23	Amount of line 21 Related to Section 504 compliance					
24	Amount of line 21 Related to Security – Soft Costs					
25	Amount of Line 21 Related to Security – Hard Costs					
26	Amount of line 21 Related to Energy Conservation Measures					

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

eneral Description of Major Work Categories	Dev. Acct No.	ousing Factor Gr Quantity		mated Cost	Total Actu	al Cost	Status of Work
					Total Actual Cost		
			Original	Revised	Funds Obligated	Funds Expended	
perations	1406		38300	38300	38300	38300	complete
lministration Clerk	1410		1500	1500	1500	1500	complete
anage CFP	1410		2100	2600	2600	2600	complete
one and fax expense	1410		250	0	0	0	_
gal Publication fees	1410		250	0	0	0	
terior painting	1460	4	2443	1942.92	1942.92	642.92	
eplace refrig. Rngs.	1465	10	2589	3294.08	3294.08	1980	
eplace copy machine	1475	1	4000	3795	3795	3795	Complete
Total			51432	51432	51432	48817.92	
dr an e g	ministration Clerk nage CFP one and fax expense gal Publication fees erior painting blace refrig. Rngs. blace copy machine	ministration Clerk nage CFP 1410 one and fax expense gal Publication fees 1410 erior painting 1460 olace refrig. Rngs. 1465 olace copy machine 1475	ministration Clerk nage CFP 1410 one and fax expense gal Publication fees 1410 erior painting 1460 place refrig. Rngs. 1465 10 1475 1	ministration Clerk 1410 1500 mage CFP 1410 2100 one and fax expense 1410 250 gal Publication fees 1410 250 erior painting 1460 4 2443 olace refrig. Rngs. 1465 10 2589 olace copy machine 1475 1 4000	ministration Clerk 1410 1500 1500 mage CFP 1410 2100 2600 one and fax expense 1410 250 0 gal Publication fees 1410 250 0 erior painting 1460 4 2443 1942.92 olace refrig. Rngs. 1465 10 2589 3294.08 olace copy machine 1475 1 4000 3795	ministration Clerk 1410 1500 1500 1500 2600 2600 2600 one and fax expense 1410 250 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ministration Clerk 1410 1500 1500 1500 1500 1500 nage CFP 1410 2100 2600 2600 2600 2600 2600 2600 26

Housing 1 actor							
Annual Statement	t/Performa	ance and I	Evaluatio	n Report			
Capital Fund Pro	gram and	Capital F	und Prog	gram Replac	ement Housi	ing Factor	(CFP/CFPRHF)
Part III: Implem	entation S	chedule					
PHA Name: Talihina Hou	Type and Nur al Fund Progra cement Housir	m No: OK56P0885	0102		Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	velopment Number All Fund Obligated Name/HA-Wide (Quarter Ending Date)				all Funds Expended quarter Ending Date		Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
	6/30/04		6/30/04	6/30/06			

	/Performance and Evaluation Report gram and Capital Fund Program Replacement Housing Fac	ston (CED/CEDDH	E) Dont I. Summon				
PHA Name: Talihir Original Annua	na Housing Authority GR CR Ral Statement Reserve for Disasters/ Emergencies Revis	Grant Type and Number Capital Fund Program Grant No: OK56P08850103 Replacement Housing Factor Grant No: Revised Annual Statement (revision no:)					
Line No.	nd Evaluation Report for Period Ending: 12-31-05 Fine Summary by Development Account		d Evaluation Reportimated Cost		Total Actual Cost		
Line 140.	Summary by Development Account	Original	Revised	Obligated	Expended		
1	Total non-CFP Funds	Originar	Revised	Obligated	Lapenaea		
2	1406 Operations	8000	8000	8000	8000		
3	1408 Management Improvements	600	600	600	0		
4	1410 Administration	2151	2151	2151	228.25		
5	1411 Audit	900	900	900	0		
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures	25080	25130	25130	1803.95		
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Nondwelling Structures						
13	1475 Nondwelling Equipment	3200	3150	3150	2600.96		
14	1485 Demolition						
15	1490 Replacement Reserve						
16	1492 Moving to Work Demonstration						
17	1495.1 Relocation Costs						
18	1499 Development Activities						
19	1501 Collaterization or Debt Service						
20	1502 Contingency						
21	Amount of Annual Grant: (sum of lines 2 – 20)	39931	37556	37556	12633.16		
22	Amount of line 21 Related to LBP Activities						
23	Amount of line 21 Related to Section 504 compliance						
24	Amount of line 21 Related to Security – Soft Costs						
25	Amount of Line 21 Related to Security – Hard Costs						
26	Amount of line 21 Related to Energy Conservation Measures	8580	10935	10935			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

	on Housing Authority	Cuant Twns an	d Number			Federal FY of Gran	4. 2002	
rna Name: Talinii	na Housing Authority	Grant Type an		: OK56P08850103		rederair i oi Gran	1: 2005	
			ousing Factor G					
Development	General Description of Major	Dev. Acct	Quantity		mated Cost	Total Actu	al Cost	Status of
Number	Work Categories	No.	Qualitity	Total Esti	mated Cost	Total Actu	ai Cost	Work
Name/HA-Wide	Work Categories	INO.						WOIK
Activities								
7 ictivities								
				Original	Revised	Funds Obligated	Funds	
						<i>g</i>	Expended	
HA Wide	Operations	1406		8000	8000	8000	8000	
HA Wide	Mgmt. improvements	1408		600	600	600		
HA Wide	Pt. time Admin. clerk	1410		500	0	0	0	
HA Wide	Pt. time CFP admin	1410		1134	2151	2151	228.25	
HA Wide	Mail, telephone, fax expense	1410		317	0	0	0	
HA Wide	Publication fees	1410		200	0	0	0	
HA Wide	Audit costs	1411		900	900			
	Install showers	1460	16	9000	9000	8074.04	1803.95	
	Interior painting	1460	10	7500	5195	5195		
	Add insulation	1460	32	3580	5310	5310		
	Replace water closets	1460	35	5000	5625	5625		
	Purchase trailer	1475	1	800	750	750	750	
	Purchase computer hdw.	1475	1	2400	2400	1850.96	1850.96	
	Total			39931	39931	37556.00	12633.16	

Housing Factor							
Annual Statemen	t/Performa	ance and l	Evaluatio	n Report			
Capital Fund Pro	gram and	Capital F	und Prog	gram Replac	ement Hous	ing Factor	(CFP/CFPRHF)
Part III: Implem	entation S	chedule					
PHA Name: Talihina Hou		mber nm No: OK56P0885 ng Factor No:	0103		Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	ent Number All Fund Obligated [A-Wide (Quarter Ending Date)				all Funds Expended Quarter Ending Date		Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
	6/30/05		4-30-06	6/30/07			
		1		1	1		

Capital Fund	Program and Capital Fund Program Replacemen	it Housing Facto	or (CFP/CFPKH	F) Part I: Summa	irv		
	HINA HOUSING AUTHORITY G	Grant Type and Number Capital Fund Program Grant No: OK56P08850104 Replacement Housing Factor Grant No:					
		ed Annual Statem	`)	<u>.</u>		
		al Performance an					
Line No.	Summary by Development Account		stimated Cost	Total Actual Cost			
		Original	Revised	Obligated	Expended		
1	Total non-CFP Funds						
2	1406 Operations	4000	4000	4000	4000		
3	1408 Management Improvements	1000	1000				
4	1410 Administration	2517	2517				
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement	10550	10550				
10	1460 Dwelling Structures	21160	21160				
11	1465.1 Dwelling Equipment—Nonexpendable	3000	3000				
12	1470 Nondwelling Structures						
13	1475 Nondwelling Equipment	4500	4500				
14	1485 Demolition						
15	1490 Replacement Reserve						
16	1492 Moving to Work Demonstration						
17	1495.1 Relocation Costs						
18	1499 Development Activities						
19	1501 Collaterization or Debt Service						
20	1502 Contingency						
	Amount of Annual Grant: (sum of lines 2 – 20)	46727	46727				
22	Amount of line 21 Related to LBP Activities		10,2,				
23	Amount of line 21 Related to Section 504 compliance						
24	Amount of line 21 Related to Security – Soft Costs						
25	Amount of Line 21 Related to Security – Costs						
26	Amount of line 21 Related to Energy ConMeasures	9600	4800				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Talihin	na Housing Authority		d Number rogram Grant No Iousing Factor G		Federal FY of Grant: 2004			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Operations	1406		4000	4000	4000	4000	
HA Wide	Engineering /Arch.	1430		0	4500			
HA Wide	Training	1410		1000	1000			
HA Wide	CFP mgmt./admin.	1410		2000	2000			
HA Wide	Sundry expense	1410		317	317			
HA Wide	Bid expense	1410		200	200			
001	Replace sidewalks	1460	6995 sq ft	10550	10550			
001	Add insulation	1460	32 units	4800	4800			
001	Replace bifold doors	1460	57	8860	8860			
001	Install CO2/Smoke alarms	1460	35	3000	3000			
001	Interior painting	1460	10	7500	7500			
001	Purchase lawnmower	1475	1	4500	0			
	total			46727	46727			

Housing Luctor							
Annual Statement				-			
Capital Fund Pro	_	_	und Prog	gram Replac	ement Housi	ing Factor	(CFP/CFPRHF)
Part III: Impleme	entation S	chedule					
PHA Name: Talihina Hous	sing Authority		Type and Nu		0104		Federal FY of Grant: 2004
			cement Housir	m No: OK56P0885 ng Factor No:	0104		
Development Number		Fund Obligate	ed	A	Il Funds Expended		Reasons for Revised Target Dates
Name/HA-Wide Activities	(Qua	(Quarter Ending Date)			uarter Ending Date	2)	
	Original	Revised	Actual	Original	Revised	Actual	
	9/13/06			6/31/08			
							1

	nance and Evaluation Report				_			
	d Capital Fund Program Replacement Housing Fac							
PHA Name: Talihina		rant Type and Number			Federal FY			
			ant No OK56P08850105		of Grant: 2005			
Original Annual States	nent Reserve for Disasters/ Emergencies Revis	Replacement Housing Factorian	t (revision no:		2005			
		Final Performance and Evaluation Report						
Line No.	Summary by Development Account		nated Cost	Total Act	ual Cost			
		Original	Revised	Obligated	Expended			
1	Total non-CFP Funds							
2	1406 Operations	8000						
3	1408 Management Improvements	2000						
4	1410 Administration	2000						
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition							
9	1450 Site Improvement	34170						
10	1460 Dwelling Structures							
11	1465.1 Dwelling Equipment—Nonexpendable							
12	1470 Nondwelling Structures							
13	1475 Nondwelling Equipment							
14	1485 Demolition							
15	1490 Replacement Reserve							
16	1492 Moving to Work Demonstration							
17	1495.1 Relocation Costs							
18	1499 Development Activities							
19	1501 Collaterization or Debt Service							
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines 2 – 20)	46170						
22	Amount of line 21 Related to LBP Activities							
23	Amount of line 21 Related to Section 504	34170						
	compliance							
24	Amount of line 21 Related to Security – Soft Costs							
25	Amount of Line 21 Related to Security –							
26	Amount of line 21 Related to Energy Measures							

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Talihi	na	Grant Type an Capital Fund P Replacement H	d Number rogram Grant No: lousing Factor Gra	OK56P08850103	5	Federal FY of Gran	t: 2005	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Ha Wide	Operations	1406		8000				
"	Contract inspection	1408		2000				
"	CFP Mgmt.	1410		2000				
001	On street Parking and drainage	1450	18420 sq. ft.	34170				
	total			46170				

Housing Factor									
Annual Statement	t/Performa	ance and I	Evaluatio	n Report					
Capital Fund Pro	gram and	Capital F	und Prog	ram Replac	ement Housi	ing Factor	(CFP/CFPRHF)		
Part III: Impleme	entation S	chedule							
PHA Name: Talihina			Type and Nur		Federal FY of Grant: 2005				
			cement Housir	m No: OK56P0885 ig Factor No:					
Development Number		Fund Obligate			ll Funds Expended		Reasons for Revised Target Dates		
Name/HA-Wide Activities	(Qua	(Quarter Ending Date)			uarter Ending Date	e)			
	Original	Revised	Actual	Original	Revised	Actual			
HA Wide	8-17-07			8-17-09					

12. Capital Fund Program and Capital Fund Program Replacement Housing Factor Annual Statement/Performance and Evaluation Report

Annu	al Statement/Performance and Evaluation Re	eport					
Capit	tal Fund Program and Capital Fund Program	Replacement l	Housing Factor (CFP/CFI	PRHF) Part I: Sumn	nary		
PHA N	ame: Talihina Housing Authority	CFP Grant No:	OK56PO88502-03		FY:2003		
Ori	ginal Annual Statement Reserve for Disasters/ Eme	rgencies Revise	d Annual Statement (revision n	no:)	"		
⊠Per	formance and Evaluation Report for Period Ending:	12-31-05 Final	Performance and Evaluation l	Report			
Line	Summary by Development Account		al Estimated Cost	Total Actual Cost			
		Original	Revised	Obligated	Expended		
1	Total non-CFP Funds						
2	1406 Operations						
3	1408 Management Improvements						
4	1410 Administration						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures	8434	8434				
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Nondwelling Structures						
13	1475 Nondwelling Equipment						
14	1485 Demolition						
15	1490 Replacement Reserve						
16	1492 Moving to Work Demonstration						
17	1495.1 Relocation Costs						
18	1499 Development Activities						
19	1501 Collaterization or Debt Service						
20	1502 Contingency						
21	Amount of Annual Grant: (sum of lines 2 – 20)	8434.00	8434.00				
22	Amount of line 21 Related to LBP Activities						
23	Amount of line 21 Related to Section 504 compliance						
24	Amount of line 21 Related to Security – Soft Costs						
25	Amount of Line 21 Related to Security – Hard Costs						
26	Amount of line 21 Related to Energy Conservation Measures						

12. Capital Fund Program and Capital Fund Program Replacement Housing Factor Annual Statement/Performance and Evaluation Report

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) **Part II: Supporting Pages** PHA Name: Talihina **Grant Type and Number** Federal FY of Grant: 2003 Capital Fund Program Grant No: OK56P088502-03 Replacement Housing Factor Grant No: Development Number General Description of Major Work Dev. Acct Quantit Total Estimated Cost Total Actual Cost Status of Work Name/HA-Wide Categories No. У Activities Original Revised Funds Funds Obligated Expended 001 **Painting** 19 8434 1460

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

PHA Name: Talihina		Grant	Type and Nur	nber	Federal FY of Grant: 2003		
Capital Fund Program No: OK56P088502-03 Replacement Housing Factor No:							
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
001	2-12-06	2-12-06	2-12-06	2-12-08			

Capital Fund P	rogram Fiv	ve-Year Action Plan			
Part I: Summar	·y				
PHA Name				☐ Original 5-Year Plan ☐ Revision No:	
Development Number/Name/ HA-Wide	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
		FFY Grant: 2007 PHA FY: 2007	FFY Grant: 2008 PHA FY: 2008	FFY Grant: 2009 PHA FY: 2009	FFY Grant: PHA FY:
	Annual Statement				
PHA Wide		1000	1000	1000	
OK088-001		45727	45727	45727	
CFP Funds Listed for 5-year planning		46727	46727	46727	
Replacement Housing Factor Funds					

Activities for Year 1		ges—Work Activities Activities for Year:_3 FFY Grant: 2007 PHA FY: 2007		Activities for Year: 4 FFY Grant: 2008 PHA FY: 2008			
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost	
See	PHA Wide	Contract, work spec, bidding	1000	PHA Wide	Work spec, contract, bidding	1000	
Annual	OK088-001	Replace windows, site B	20000	OK088-001	Replace (16) heating and AC units	45727	
Statement	"	Replace floor tiles	10000				
	"	Install vinyl siding	15727				
	Total CFP	Estimated Cost	\$46727			\$46727	

Capital Fund Program Five-Year Action Plan							
Part II: Supporting Pages—Work Activities							
	Activities for Year :5		Activities for Year:				
	FFY Grant: 2009		FFY Grant:				
	PHA FY: 2009		PHA FY: Development Major Work Estimated Cost				
Developme	Major Work Categories	Estimated Cost	Development				
nt			Name/Number	Categories			
Name/Num ber							
PHA Wide	Work spec, contract bidding	1000					
OK088-001	Replace heat/air units (16)	45727					
CR000-001	Replace hear an units (10)	73121					
_							
	Total CFP Estimated Cost	\$46727			\$		